

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Building a Majority PAC (BAMPAC)

ADDRESS (number and street)

P.O.B. 2315

☐ Check if different than previously reported. (ACC)

Baltimore

MD

21203

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00412221

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Nikki Heidepriem

Signature of Treasurer

Ms. Nikki Heidepriem

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Building a Majority PAC (BAMPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		45710.53
(b) Cash on Hand at Beginning of Reporting Period.....	50470.19	
(c) Total Receipts (from Line 19)	5000.00	121700.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	55470.19	167410.53
7. Total Disbursements (from Line 31)	5295.25	117235.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50174.94	50174.94
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Building a Majority PAC (BAMPAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	25700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	0.00	25700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	96000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	5000.00	121700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ►	5000.00	121700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	5000.00	121700.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5295.25	72235.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5295.25	72235.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	45000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5295.25	117235.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5295.25	117235.59

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5000.00	121700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	121700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	5295.25	72235.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	5295.25	72235.59

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XN

Transaction ID :

Please be advised that expenditures on Schedule B, Line 21(b) support Committee activities, and are not made on behalf of specifically identified candidates. All expenditures on Schedule B, Line 21(b) are to support Committee activites, and are not for public communications and voter drive activity containing express advocacy.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Building a Majority PAC (BAMPAC)

Full Name (Last, First, Middle Initial)

A. General Motors Corporation PAC (GM PAC)

Mailing Address 1660 L St NW
Ste 400

City Washington State DC Zip Code 20036-5640

FEC ID number of contributing
federal political committee.

C C00076810

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 11 / 2013

Transaction ID : C9081283

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

B. McAfee PAC

Mailing Address 5000 Headquarters Dr

City Plano State TX Zip Code 75024-5826

FEC ID number of contributing
federal political committee.

C C00478719

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2013

Transaction ID : C9079306

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

5000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Building a Majority PAC (BAMPAC)

Category/
Type

3112.08

State: District:

Category/
Type

26.06

State: District:

Category/
Type

375.00

State: District:

3513.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building a Majority PAC (BAMPAC)

Full Name (Last, First, Middle Initial)

A. Ingeborg Knight

Mailing Address 2902 W Strathmore Ave

City	State	Zip Code
Baltimore	MD	21209-3811

Purpose of Disbursement
salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2013

Transaction ID : D522181

Amount of Each Disbursement this Period

1487.36

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 5119 Roland Ave

City	State	Zip Code
Baltimore	MD	21210

Purpose of Disbursement
bank fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522247

Amount of Each Disbursement this Period

151.45

Full Name (Last, First, Middle Initial)

C. CitiCards

Mailing Address PO Box 183064

City	State	Zip Code
Columbus	OH	43218-3064

Purpose of Disbursement
credit card payment

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522182

Amount of Each Disbursement this Period

143.30

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1782.11

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building a Majority PAC (BAMPAC)

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 5801 Metro Dr

City	State	Zip Code
Baltimore	MD	21215-3204

Purpose of Disbursement
internet service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522183

Amount of Each Disbursement this Period

33.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Postal Service

Mailing Address 900 E Fayette St

City	State	Zip Code
Baltimore	MD	21233-1000

Purpose of Disbursement
postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522185

Amount of Each Disbursement this Period

26.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. vendors under \$ 200

Mailing Address PO Box 2315

City	State	Zip Code
Baltimore	MD	21203-2315

Purpose of Disbursement
transportation, supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522186

Amount of Each Disbursement this Period

37.55

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building a Majority PAC (BAMPAC)

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 17577

City	State	Zip Code
Baltimore	MD	21297-0513

Purpose of Disbursement
telephone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D522184

Amount of Each Disbursement this Period

46.25

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

5295.25
